PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

304-25011-11507

		CLAIMS AS	mn 2)	SMALL EN	OR	OTHER THAN OR SMALL ENTITY					
TOTAL CLAIMS			ر در				RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			() minus 20=		*42.		X\$ 9=		OR	X\$18=	75E
INDEPENDENT CLAIMS			minus 3 =		* 4		X42=		OR	X84=	356
MU	TIPLE DEPEN	DENT CLAIM PE	RESENT				+140=		OR	+280=	
* If the difference in column 1 is less than zero, ente					"0" in c	olumn 2	TOTAL		OR	TOTAL	1842
CLAIMS AS AMENDED - PART II								<u> </u>		OTHER	
_		(Column 1)		(Colur		(Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	·
	Independent	* NTATION OF MI	Minus	***	CL AIM	=	X42=		OR	X84=	
	TINOTTRESE	IVIATION OF IVI	JEHIFEE DEI	LINDLINI	CLAIIVI		+140=		OR	+280=	
							TOTAL		OR	TOTAL ADDIT. FEE	
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AINA	=	X42=		OR	X84=	
	FINST PRESE	NIATION OF MI	JETIPLE DEI	ENDEN	CLAIM	<u> </u>	+140=		OR	+280=	
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	**	HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	ļ	OR	X\$18=	
	Independent	*	Minus	***	T CL AIM	=	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE									OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											
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FORM PTO-875 (Rev. 12/02)